

**ACA (Affordable Care Act) §3004 Hospice Quality Reporting Program (QRP):  
Program Evaluation**

**STRUCTURED INTERVIEW QUESTIONS - HOSPICE**

Introduction of self and reason for interview:

**Example:** The Centers for Medicare and Medicaid Services (CMS) wants to learn more about its new QRP program and how it is impacting providers. Explain the evolution from last year's requirements, the changes for CY (Calendar Year) 2014 data submission and the HIS (Hospice Item Set) implementation in July 2014. CMS is interested particularly in:

- a. Is the evolving program meaningful? Is it fair?
  - b. What can be done to make it more meaningful/fair?
  - c. How can burden to providers be reduced?
  - d. CMS wants to stress that this information is intended to improve the process. All responses will be confidential and not linked with a specific provider.
1. Can you please introduce yourself and what you do here?
  2. Please tell me a little about your hospice. What type of patient/clients do you serve? (Interviewer: explain what you mean by type – diagnosis mix, place of residence, etc.)
  3. How does your hospice compare to other providers (i.e., number of clients served, unique programs, etc.)
  4. In broad terms, not restricted to the QRP measures mandated by CMS, tell me about what data you look at, and how often you look at the data?
    - a. What actions do, or can you, take in response to the data
    - b. Can you give me any concrete examples of any changes in practices that resulted from looking at data?
  5. Now, narrowing the discussion to only the CMS mandated measures that will be derived from the HIS, talk to me about how you feel in general about the QRP HIS mandate/measures?
    - a. Are they meaningful to your performance improvement program?
    - b. What other measures would be meaningful to your hospice?
  6. Looking at the QRP program in the “big picture”, in your opinion or experience, what do you anticipate will be the overall impact of the QRP process on practice and outcomes?
    - a. Impact on healthcare behaviors
    - b. Impact on patient outcomes
    - c. Impact on healthcare costs and expenditures
  7. Do you have any suggestions that you can provide to CMS that might make the QRP process better, fairer, easier, more meaningful, etc.?